

County: Dane

Facility ID: 1630

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HEARTLAND COUNTRY VILLAGE
634 CENTER ST

BLACK EARTH 53515 Phone:(608) 767-2572

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 50

Total Licensed Bed Capacity (12/31/04): 50

Number of Residents on 12/31/04: 47

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 46

Non-Profit Corporation

Skilled

No

Yes

Yes

46

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		61.7	
Home Health Care	No	-----	-----	-----	-----	1 - 4 Years		21.3	
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	6.4	More Than 4 Years		17.0	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	34.0	65 - 74	8.5			-----	
Day Services	No	Mental Illness (Other)	2.1	75 - 84	42.6			100.0	
Respite Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	31.9	*****			
Adult Day Care	No	Para-, Quadra-, Hemiplegic	2.1	95 & Over	10.6	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	4.3		-----	Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	25.5		100.0	(12/31/04)			
Home Delivered Meals	No	Cardiovascular	6.4	65 & Over	93.6	-----			
Other Meals	No	Cerebrovascular	0.0		-----	RNs		7.5	
Transportation	No	Diabetes	0.0	Gender	%	LPNs		11.4	
Referral Service	No	Respiratory	6.4		-----	Nursing Assistants,			
Other Services	Yes	Other Medical Conditions	19.1	Male	17.0	Aides, & Orderlies			
Provide Day Programming for			-----	Female	83.0				
Mentally Ill	No		100.0		-----				
Provide Day Programming for					100.0				
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	1	12.5	462	3	11.1	153	0	0.0	0	1	8.3	200	0	0.0	0	0	0.0	0	5	10.6
Skilled Care	7	87.5	328	24	88.9	130	0	0.0	0	10	83.3	164	0	0.0	0	0	0.0	0	41	87.2
Intermediate	---	---	---	0	0.0	0	0	0.0	0	1	8.3	147	0	0.0	0	0	0.0	0	1	2.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		27	100.0		0	0.0		12	100.0		0	0.0		0	0.0		47	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	3.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	3.2	Bathing	0.0	38.3	61.7	47
Other Nursing Homes	3.2	Dressing	14.9	48.9	36.2	47
Acute Care Hospitals	84.0	Transferring	21.3	51.1	27.7	47
Psych. Hosp.-MR/DD Facilities	1.1	Toilet Use	19.1	44.7	36.2	47
Rehabilitation Hospitals	0.0	Eating	48.9	31.9	19.1	47
Other Locations	5.3	*****				
Total Number of Admissions	94	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	2.1	Receiving Respiratory Care	6.4	
Private Home/No Home Health	2.2	Occ/Freq. Incontinent of Bladder	59.6	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	28.6	Occ/Freq. Incontinent of Bowel	38.3	Receiving Suctioning	4.3	
Other Nursing Homes	2.2			Receiving Ostomy Care	2.1	
Acute Care Hospitals	41.8	Mobility		Receiving Tube Feeding	6.4	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	6.4	Receiving Mechanically Altered Diets	36.2	
Rehabilitation Hospitals	0.0					
Other Locations	8.8	Skin Care		Other Resident Characteristics		
Deaths	16.5	With Pressure Sores	6.4	Have Advance Directives	70.2	
Total Number of Discharges		With Rashes	8.5	Medications		
(Including Deaths)	91			Receiving Psychoactive Drugs	66.0	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.0	92.7	0.99	89.0	1.03	90.5	1.02	88.8	1.04
Current Residents from In-County	70.2	84.6	0.83	81.8	0.86	82.4	0.85	77.4	0.91
Admissions from In-County, Still Residing	23.4	20.5	1.14	19.0	1.23	20.0	1.17	19.4	1.21
Admissions/Average Daily Census	204.3	153.0	1.34	161.4	1.27	156.2	1.31	146.5	1.40
Discharges/Average Daily Census	197.8	153.6	1.29	163.4	1.21	158.4	1.25	148.0	1.34
Discharges To Private Residence/Average Daily Census	60.9	74.7	0.82	78.6	0.77	72.4	0.84	66.9	0.91
Residents Receiving Skilled Care	97.9	96.9	1.01	95.5	1.02	94.7	1.03	89.9	1.09
Residents Aged 65 and Older	93.6	96.0	0.98	93.7	1.00	91.8	1.02	87.9	1.07
Title 19 (Medicaid) Funded Residents	57.4	54.6	1.05	60.6	0.95	62.7	0.92	66.1	0.87
Private Pay Funded Residents	25.5	32.6	0.78	26.1	0.98	23.3	1.10	20.6	1.24
Developmentally Disabled Residents	0.0	0.5	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	36.2	37.4	0.97	34.4	1.05	37.3	0.97	33.6	1.08
General Medical Service Residents	19.1	20.2	0.95	22.5	0.85	20.4	0.94	21.1	0.91
Impaired ADL (Mean)	58.3	50.1	1.16	48.3	1.21	48.8	1.19	49.4	1.18
Psychological Problems	66.0	58.4	1.13	60.5	1.09	59.4	1.11	57.7	1.14
Nursing Care Required (Mean)	8.8	7.0	1.26	6.8	1.28	6.9	1.27	7.4	1.18